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ABSTRACT

These workshop sessions were designed as a series to assist low income parents to deal more effectively with the primary sources of stress in their lives, with particular attention given to issues of parenting, self-care, and the reduction of isolation. Sessions were field-tested by highly qualified and experienced trainers, each of whom also had clinical experience and high levels of knowledge of child development and parenting. Workshop Session I defines stress and points out signs indicating stress. Session II focuses on helping parents to identify activities that give them pleasure or that they would like to do, and then to plan and later carry out one such activity. Sessions III and IV discusses child development and parental stress. Session V explores child development and parental values. Sessions VI and VII, respectively, probe reasons for children's behavior, and the relationship between anger and stress. Session VIII reviews previous material and offers conclusions. Users of this curriculum are cautioned about their choice of trainers -- the workshop sessions require trainers who are knowledgeable about stress, group process, counseling, child development, and parenting and who can deal effectively with individuals experiencng high levels of anxiety, stress, or even crisis in their lives. (RH)

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A STRESS MANAGEMENT CURRICULUM FOR HEAD START PARENTS

PREPARED BY

NORTHWEST RESOURCE ASSOCIATES
&
EARLY CHILDHOOD OUTREACH CENTER

SUBMITTED TO

CITY OF SEATTLE
DEPARTMENT OF HUMAN RESOURCES
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INTRODUCTION

These workshops sessions were designed as a series which would assist low income parents to deal more effectively with the primary sources of stress in their lives, with particular attention to issues of parenting, self-care, and the reduction of isolation.

The sessions were field-tested by highly qualified and experienced trainers each of whom also had clinical experience and high levels of knowledge of child development and parenting. Users of this curriculum are cautioned about their choice of trainers--the workshop sessions require trainers who are knowledgeable about stress, as well as group process, counseling, child development and parenting, in order for participants to achieve the maximum benefit from the sessions.

In many of the field-test sessions, participants revealed highly personal information to the group. It is essential that trainers underscore the importance of confidentiality among group members. Since many of the parents who attended the stress management sessions were acquainted with each other, having their children enrolled in the same Head Start or child care center, a high level of trust was possible, but also could be hindered if participants were unsure about private information being revealed outside of the group. Trainers must be sensitive to this concern.

Another important trainer characteristic is his/her ability to deal effectively with individuals who are experiencing high levels of anxiety, stress, or even crisis in their lives. This occurred not only as an element of the training sessions, themselves, but also in information that participants revealed about their day-to-day lives. In a few situations, trainers were concerned about possible child maltreatment or neglectful behaviors on the part of participants, and a clear set of guidelines must be established, prior to the beginning of the training, for the trainers to follow in this type of situation. Under the laws of most states, human services professionals and those who work with children are required to report suspected cases of child abuse and neglect to police or Child Protective Services. As a consequence, information which is shared with the group which might indicate serious parenting problems cannot be ignored by the trainers.

In this regard, it is recommended that concerns about a parent's behavior be expressed to the parent outside of the group. If the trainer suspects that child abuse or neglect is occurring, the parent should be informed that a report will be made to the proper authorities. At this point, the need for highly skilled trainers becomes a vital one, not only to provide support and nurturance to the parent, but also to provide the necessary resource referrals for the parent. The stress management training sessions were not intended to be group therapy, although there was a desire among some group participants to lead the group in this direction. As a consequence, individuals skilled in group process, and in counseling, would be ideal trainers.

The field-test sessions were conducted by pairs of trainers, rather than by individuals, with the exception of one group of parents. Not only did this

make it possible to offer more special attention to each of the participants, but also it allowed for modeling of successful behaviors and attitudes, from the point of view of two perspectives, rather than just one.

WORKSHOP SESSIONS

SESSION I: WHAT IS STRESS? WHAT ARE SIGNS OF STRESS?

1.	Introductions, Warm-up Exercise	20 Minutes
2.	"Super-Mom" and "Symptoms of Parent Burnout"	10 Minutes
3.	Lecture/Discussion: What is Stress? "Self-Observable Signs of Stress"	15 Minutes
4.	Signs of stress--discussion of handout and other observable signs of stress	15 Minutes
5.	Summary of session, lead-in to Deep Muscle Relaxation (DMR)	5 Minutes
6.	Deep Muscle Relaxation (DMR)	30 Minutes

7. Assignments for the following week:

   a. DMR (handout instructions), two times during the week

   b. Calendar: each day, record a very stressful event and one thing participants did for themselves

MATERIALS/SUPPLIES NEEDED:

1. A folder for each participant with a registration form, a large nametag, and each of the handouts, "Self-Observable Signs of Stress," "Deep Muscle Relaxation Instructions," and a supply of calendars

2. For the trainer: Resource papers: "Symptoms of Parent Burnout," "Defining Stress: The General Adaptation Syndrome," and the Deep Muscle Relaxation script

3. Chartpack or butcher paper; marking pens; tape; pens or pencils

4. An attendance form for participants to sign

SESSION I

At the start of the session, or while participants are arriving, ask each to complete a registration form, sign the attendance form, and complete the pre-test, which will be in their folders. Point out that all of the information that is being collected will be kept confidential, and that none of it will be used without their prior approval.

Ask participants to write their names on their nametags and to list two things they like to do.

After all of the paperwork is completed, ask the participants to find a place to sit.

The trainers then introduce themselves, mentioning any formal or special training they have had which is relevant to the stress management workshop. To start the warm-up exercise, ask each of the participants to stand and to move quietly around the room, looking at each others' nametags to locate another person who has listed an interest similar to their own.

After each has found a partner, they should be told that they will be introducing each other to the group and will be telling the group of their mutual interest, as well as the other's additional interest on her/his nametag. Some participants may not have found someone with a similar interest, and should be introduced by the trainer, noting that there is great variety in the things that interest people, or something to that effect.

After each participant has been introduced, the trainer should ask that every one sit and get comfortable.

As a lead-in to the lecture about stress, the trainer should read the resource paper, "Symptoms of Parent Burnout" to the group, asking the group for their reactions. The trainer may want to use the list of signs of stress at the end of the paper, or may ask the group to list those things that they heard in the story that were signs of stress. These can be recorded on the butcher paper and posted where the trainer and participants can refer to them. The trainer also may want to relate a similar story, which makes the same points, about a "Super Mom" who tries to be all things to all people. The purpose is to demonstrate the variability of stressful situations and how outside pressures and responsibilities can lead to stress.

The trainer, then in her/his own words, explains that the workshops are designed to help participants learn more about stress and how to cope with it. We are all affected by stress, and it's not likely that we will be able to eliminate all of the stress from our lives. We can learn to deal more effectively with stress, so that we can prevent stress-related illnesses, negative impacts on our relationships with others, and other manifestations of stress in our lives.

Most of the participants probably know something about stress, and its harmful effects, such as high blood pressure, headaches, and depression. Few of us know how to prevent or alleviate some of these harmful effects. There are three major goals for the series of workshops:

1. To understand what stress is;

2. To recognize sources of stress in our lives; and

3. To learn and practice effective stress management techniques.

The trainer should ask each participant to complete the handout, "Self-Observable Signs of Stress." After everyone has marked those items which they see as signs of stress in themselves, the trainer asks for participants to define what they believe stress is, and what they see as signs of stress. These should be recorded on a chartpack or butcher paper, so that these items can be referred to in later sessions. The trainer, during this discussion, should ensure that the following points are made:

1. We all experience stress.

2. Explain the General Adaptation Syndrome.

3. Explain the concept of "distress" and how long-term distress can contribute to the development of migraine headaches, ulcers, high blood pressure, heart attacks, etc.

4. Most of the stresors we encounter in our lives are not major, but rather the result of everyday occurances.

One purpose of this exercise is to involve participants in the defining of stress. Since a major part of the stress management training sessions is focused on the specific sources of stress in the group members' lives, it is useful for the trainers to draw out this information. In addition, this activity helps the participants to begin to feel comfortable talking to the group. Finally, this exercise allows participants to see the array of stressors in others' lives and to see that they are not alone in feeling stress.

The trainer then wraps up the discussion, summarizes the session and introduces the Deep Muscle Relaxation (DMR) exercise.

Some participants may be uncomfortable with the concept of Deep Muscle Relaxation, and the trainer should explain that the important element is the relaxation, that there is no "right" way to do it, and that many people find it very beneficial in coping with the effects of stress. Conduct the DMR exercise.

After the DMR, make sure that each participant has the DMR handout and instruct them to practice the relaxation technique at least twice during the coming week. Also, explain the calendar (that, each day during the week, throughout the workshop series, they will be recording events and activities) and instruct them to record, every day during the coming week, a stressful event and one thing that they did for enjoyment for themselves.

Answer any questions about the DMR, the assignments, or any of the information covered during the session.

SYMPTOMS OF PARENT BURNOUT--A DAY IN THE LIFE OF A BURNED-OUT PARENT

At 7:30 the alarm goes off--it's time to get the kids up for school. But--you feel so tired and you're probably catching a cold. You'd like to stay in bed, but the kids could never get ready on their own. So you get up, wake the kids and check to see what's for breakfast. You set out cold cereal and find that there is no milk even though you went to the grocery store yesterday. You call the kids again.

Ten minutes later (after you call them two more times) your daughter comes down to complain that her red blouse is dirty and she <u>needs</u> it today. (Couldn't you have gotten it from her room and washed it? You <u>knew</u> she wanted it!)

You call your son again and they both sit down to eat while you fix lunches. You daughter doesn't like what you are fixing and insists on buying lunch, but you only have two nickels and 15 pennies in your purse. While you're trying to convince her to take a sack lunch, your son informs you that he has to take brownies to the class party tomorrow.

The kids finally leave. You can't decide if you should clean the kitchen or go back to bed, so you sit and stare out the window for an hour. You then notice that you forgot to put the sandwich in your son's lunch, which means he only has two graham crackers. You consider not taking it, maybe he can charge a hot lunch, or maybe you can take it on your way to work this afternoon. Maybe he won't even notice.

You decide to figure it out later and start toward the bedroom to make the bed. As you pass through the living room you notice the vacuum cleaner from last week and start to vacuum. The phone rings and it's your daughter saying she needs her blue skirt for the program tomorrow. You gather some dirty clothes along with the skirt and head for the washing machine, thinking about baking the brownies and realize that you feel flu-ish. You realize that you have been standing in front of the dryer watching it turn for quite a while.

You sit down and have a cup of coffee to plan your son's birthday party for tomorrow, but you can't think of any good ideas or remember what he asked for.

You start to get dressed for work and notice the hem is torn on one leg of your pants. You fix it with black electrical tape (the only kind you can find) and hope that it will hold. As you start the car, the gas gauge hits empty. Since you still only have two nickels and 15 pennies, you cross your fingers and pray that you'll make it to work so you can borrow a dollar from someone.

At 5:30 you race in from work and head for the kitchen to start dinner. On the way you trip over the dog, the cat, the hamster cage, two baseball bats, one red blouse and the roll of electrical tape.

You hear the kids arguing about which TV show to watch, and yell at them to stop, but they continue. Ten minutes later you yell again for them to cut

it out or you'll turn it off.

You're looking for your recipe for salmon loaf and your son comes in--"mom...mom...poke, poke...MOM."

"What do you want?"

"Could I have a peanut butter sandwich?"

"No! You cannot. I'm tired of you and your sister alsways asking for something."

"Go to your room and stay there until I say you can come out."

Finally it's 8:45 and you collapse into the bed--only to toss and turn, thinking about how tomorrow is your son's birthday and you still haven't planned his party.

Did that day sound familiar? Here is a list of symptoms that were depicted in the story:

-Feeling tired and exhausted all day, frequent clock-watching to see how late it is

-An inability to concentrate or listen to what a child is saying

-Ignoring a child's request

-Feeling immobilized--there's nothing I can do to change the situation

-High resistance to getting up in the morning

-Going to bed early

-Problems sleeping at night, tossing and turning, feeling restless

-Somatic symptoms, the nagging cold, frequent bouts with flu or virus

-Spending a lot of time doing nothing

-Wandering aimlessly

-Feeling bored, resentful, disenchanted, fed up, discouraged, confused, futile, and can't talk about it

-Constantly "busy," but never accomplishing anything

-Totally negative attitude

From: Preventing Parent Burnout, by the Coalition for Child Advocacy, Bellingham, Washington, 1983

DEFINING STRESS: THE GENERAL ADAPTATION SYNDROME

One definition of stress is the "rate of wear and tear within the body" and another, more precise medical definition developed by Dr. Hans Selye is a three-stage reaction to stress: the alarm reaction; resistance; and exhaustion.

In the alarm stage, the body recognizes the stressor, such as an attacking dog, and prepares for fight or flight. The body does this by sending messages from the brain, which stimulate the pituitary to release its hormones. These trigger the adrenal glands to pour out adrenaline. Adrenaline increases heartbeat and rate of breathing, raises blood sugar level, increases perspiration, dilates the pupils, and slows digestion. The process results in a huge burst of energy, greater muscular strength, and better hearing and vision--all abilities that you can use to fight or flee.

In the resistance stage, the body repairs any damage caused by the stress and may adapt or get used to such stresses as extreme cold, hard physical labor, worries. However, the stress, if it continues, will maintain the body on alert and can't repair the damage, leading to the stage of exhaustion. If exhaustion continues, you can develop one of the diseases of stress, such as high blood pressure, migraine headaches, etc.

Most physical or emotional stressors don't last long and produce changes in us resulting from the first and second stages. At first, we get used to stress. During our lifetime, we go through these two stages many times; we need these response mechanisms to adapt to the many demands of living.

Most of the stressors we encounter are emotional stressors. The stressor effect depends more on how we react to the stress and less on what caused it. Each of us has developed ways of reacting to the various stressors we encounter. It is this conditioned response that can create problems and possible threats to our health.

Adapted from: Workshop Models for Family Life Education: Four One-Day Workshops, Boston, Massachusetts: RCI, 1980.

DEEP MUSCLE RELAXATION SCRIPT (1)

The trainer may use this script, or any variation which feels both comfortable and familiar. Since the Deep Muscle Relaxation exercise is practiced during each of the sessions, the trainer may want to make a tape recording of the script. In some sessions, relaxing music was played in order to eliminate any distracting noises.

"Arms: Settle back as comfortably as you can. Let yourself relax to the best of your ability. Now, as you relax like that, clench your right fist. Just clench your fist tighter and tighter, and study the tension as you do it. Keep it clenched and feel the tension in your right fist, hand and forearem. Now relax. Let the fingers of your right hand become loose, and observe the contrast in your feelings.

Now, let yourself go and try to become more relaxed all over. Once more, clench your right fist really tight. Hold it, and notice the tension again. Now let go, relax; your fingers straighten out, and you notice the difference once more.

Now repeat this with your left fist. Clench your left fist while the rest of your body relaxes; clench that fist tighter and feel the tension. And now relax. Again enjoy the contrast. Repeat that once more; clench the left fist, tight and tense. Now do the opposite of tension; relax and feel the difference. Continue relaxing like that for a while.

Clench both fists tighter and tighter; both fists tense, forearms tense. Study the sensations. Relax. Straighten out your fingers and feel that relaxation. Continue relaxing your hands and forearms more and more.

Now bend your elbows and tense your biceps; tense them harder and study the tension feelings. All right, straighten out your arms; let them relax and feel the difference again. Let the relaxation develop. Once more, tense your biceps; hold the tension and observe it carefully. Straighten the arms and relax; relax to the best of your ability. Each time, pay close attention to your feelings when you tense up and relax. Now straighten your arms; straighten them so that you feel the most tension in the triceps muslces along the back of your arms; stretch your arms and feel that tension. Now relax.

Get your arms back into a comfortable position. Let the relaxation proceed on its own. The arms should feel comfortably heavy as you allow them to relax. Straighten the arms once more so that you feel the tension in the triceps muscles; straighten them. Feel that tension, and relax.

Now let's concentrate on pure relaxation in the arms without any tension. Get your arms comfortable and let them relax further and further. Continue relaxing your arms even further. Even when your arms seem fully relaxed, try to go that extra bit further; try to achieve still deeper levels of relaxation.

(1) Reprinted from: Behavior Therapy Techniques: A Guide to the Treatment of Neuroses, by Joseph Wolpe and Arnold A. Lazarus. Oxford, England: Pergamon Press, Ltd.

Face, Neck, Shoulders, Upper Back: Let all your muscles go loose and heavy. Just settle back quietly and comfortably. Wrinkle up your forehead; relax and smooth it out. Picture the entire forehead and scalp becoming smoother as the relaxation increases. Now frown and crease your brows and study the tension; let go of the tension again. Smooth out the forehead once more.

Now, close your eyes tighter and tighter. Feel the tension, and relax your eyes. Keep your eyes closed, gently, comfortably, and notice the relaxation. Now clench your jaws, bite your teeth together; study the tension throughout the jaws; relax your jaws now. Let your lips part slightly. Appreciate the relaxation. Now press your tongue hard against the roof of your mouth. Look for the tension. All right, let your tongue return to a comfortable and relaxed position. Now purse your lips. Press your lips together tighter and tighter; relax them. Note the contrast between the tension and your relaxation. Feel the relaxation all over your face, all over your forehead and scalp, eyes, jaws, lips, tongue, and throat. The relaxation progresses further and further.

Now attend to your neck muscles. Press your head back as far as it can go and feel the tension in the neck; roll it to the right and feel the tension shift; now roll it to the left. Straighten your head and bring it forward; press your chin against your chest. Let your head return to a comfortable position, and study the relaxation. Let the relaxation develop. Feels good? Now shrug your shoulders, as tight as they will go. Hold the tension. Feel the pain. Drop your shoulders and feel the relaxation. Your neck and shoulders are relaxed. Shrug your shoulders again and move them around, loosely, easily, relaxed.

Bring your shoulders up and forward and back. Feel the tension in your shoulders and in your upper back. Drop the shoulders once more, and relax. Pause to think: let the relaxation spread deep into the shoulders, right into your back muscles. Feel a wave of peace spread through them. Let the relaxation spread deep into the shoulders, right into your back muscles. Relax your neck and throat and your jaws and the rest of your face. The pure relaxation takes over and grows deeper, deeper, ever deeper.

Chest, Stomach, Lower Back: Relax your entire body to the best of your ability. Feel that comfortable heaviness that comes with relaxation. Breathe easily and freely, in and out. Notice how the relaxation increases as you exhale; as you breathe out, just feel the relaxation. Now breathe right in and fill your lungs; inhale deeply and hold your breath. Study the tension. Now exhale. Let the walls of your chest grow loose and push the air out automatically. Continue relaxing and breath freely and gently. Feel the relaxation and enjoy it. With the rest of your body as relaxed as possible, fill your lungs again. Breathe in deeply and hold it again. Fine. Let the air out and appreciate the relief. Just breathe normally. Continue relaxing your chest and let the relaxation spread to your back, shoulders, neck and arms. Merely let go, and enjoy the relaxation.

Now let's attend to your stomach area. Tighten your stomach muscles; make your abdomen hard. Notice the tension, then relax. Let the muscles loosen

and notice the contrast. Once more, press and tighten your stomach muscles. Hold the tension and study it, then relax. Notice the general well-being that comes with relaxing your stomach. Now draw your stomach in. Pull the muscles right in and feel the tension this way; now relax again. Let your stomach out. Continue breathing normally and easily and feel the gentle massaging action all over your chest and stomach. Again pull your stomach in and hold the tension. Now push out and tense like that. Hold the tension. Once more pull in and feel the tension; now relax your stomach fully. Let the tension dissolve as the relaxation grows deeper. Each time you breathe out, notice the rhythmic relaxation both in your lungs and in your stomach. Notice how your chest and your stomach relax more and more. Try and let go of all contradictions anywhere in your body.

Now direct your attention to your lower back. Arch up your back, make your lower back quite hollow, and feel the tension along you spine. Settle down comfortably again, relaxing the lower back. Arch your body up and feel the tension as you do so. Try to keep the rest of your body as relaxed as possible. Try to localize the tension within your lower back area. Relax once more, relaxing further and further. Relax your lower back, relax your upper back, spread the relaxation to your stomach, chest, shoulders, arms, and your face. All these parts relax further, and further, deeper, and even deeper.

Hips, Thighs, Calves; Complete Body Relaxation: Let go of all tensions and relax. Now flex your buttocks and thighs. Flex your thighs by pressing down on your heels as hard as you can; relax and note the difference. Straighten your knees and flex your thigh muscles again. Hold the tension, then relax your hips and thighs. Allow the relaxation to proceed on its own. Press your feet and toes downward, away from your face, so that your calf muscles become tense. Study that tension; relax your feet and calves. This time, bend your feet toward your face so that you feel tension along your shins. Bring your toes right up; relax again. Keep relaxing for a while. Now let yourself relax further, all over. Relax your feet, ankles, calves and shins, knees, thighs, buttocks, and hips. Feel the heaviness of your lower body as you relax still further.

Now spread the relaxation to your stomach, waist, lower back. Let go more and more. Feel that relaxation all over. Let it proceed to your upper back, chest, shoulders and arms, and right to the tips of your fingers. Keep relaxing more and more deeply. Make sure that no tension has crept into your throat; relax your neck and your jaws, and all of your facial muscles. Keep relaxing your whole body like that for a while. Let yourself relax.

Now you can become twice as relaxed as you are, merely by taking in a really deep breath and slowly exhaling. With your eyes closed, so that you become less aware of things around you and thus prevent any surface tensions from developing, breathe in deeply and feel yourself becoming heavier. Take in a long, deep breath and let it out very slowly. Feel how heavy and relaxed you have become.

In a state of perfect relaxation you should feel unwilling to move a single muscle of your body. Think about the effort that would be required to raise your right arm. As you think about raising your right arm, see if you can notice any tensions that might have crept into your shoulder and

your arm. Now you decide not to lift the arm but to continue relaxing. Observe the relief and the disappearance of the tension; just carry on relaxing like that. When you wish to get up, count backward from four to one. You should then feel fine and refreshed, wide awake and calm!

WEEKLY CALENDAR

SELF-OBSERVABLE SIGNS OF STRESS

_____ Feeling rejected

_____ Feeling hopeless

_____ Being unhappy

_____ Being tired

_____ Pounding of the heart, an indicator of high blood pressure

_____ Feeling depressed

_____ The overpowering urge to cry or to run and hide

_____ High-pitched, nervous laughter

_____ Insomnia

_____ Sweating

_____ Being emotionally exhausted

_____ Feeling worthless

_____ Feeling sick to your stomach

_____ Headaches

_____ Pain in the neck or lower back

_____ Loss of or excessive appetite

_____ Increased smoking

_____ Increased alcohol or drug use

_____ Accident proneness

_____ Feelings of weakness or dizziness

_____ Feeling "keyed up"

_____ Nightmares

_____ Inability to concentrate

_____ Feeling afraid, but not knowing exactly what we're afraid of

From The Stress of Life, Dr. Hans Selye, 1978; and Preventing Parent Burnout, Coalition for Child Advocacy, Bellingham, Washington, 1983.

DEEP MUSCLE RELAXATION TECHNIQUE

It's easy to learn how to relax all of the muscle groups in your body. This technique is best done in a quiet setting, away from as many distractions as possible. This could be a quiet room, or even sitting at an office desk. You should probably practice this while sitting in a chair, since you may fall asleep if you lie down.

This method of relazation involves tensing (tightening up and holding the tension) and then relaxing the muscle. Each time that you do this, you should concentrate on the difference in body sensations and feelings between the tension and relaxation. Learning these feelings will help you become aware of any tense muscles which you can then relax. Do the exercise as follows:

Right hand and forearm	2 times
Left hand and forearm	2 times
Biceps - bend elbow	once
Triceps - arms stretched out	once
Forehead - wrinkle up	once
Forehead - wrinkle down	once
Eyes - close tightly	once
Tongue - pressed up to roof of mouth	once
Neck - head pressed back	once
Neck - head pressed back, rolling head to left and to right	2 times
Shoulders - shrugged up	2 times
Chest - deep breath, hold it, exhale slowly	2 times
Stomach - hold it in	2 times
Stomach - hold it out	2 times
Lower back - arch it up	2 times
Thighs - press down on heels	2 times
Calves - toes forward	2 times
Shins - toes up and back	2 times

SESSION II: TAKING CARE OF YOURSELF

1. Introductions (of any new participants)
2. Review of previous week's session — 10 Minutes
3. Review of assignment from previous week — 10 Minutes
4. Lecture/discussion on self-care — 15 Minutes
5. "Taking Care of Yourself" exercise — 30 Minutes
6. Deep Muscle Relaxation — 30 Minutes
7. Assignments for the following week:
   a. DMR two times during the week
   b. Calendar: each day, record something they enjoyed about their children
   c. Accomplish the "Taking Care of Yourself" exercise

MATERIALS/SUPPLIES NEEDED

1. Folders with Session I handouts and forms for new participants
2. Sign-up sheet to pass around for the participants to sign
3. A blank calendar for the next week
4. Paper and crayons for drawing pictures; pens or pencils
5. Butcher paper, marking pens and tape
6. "Taking Care of Yourself" handout
7. For the trainer: Resource papers on self-care

SESSION II

Open this session with introductions of new participants (and asking previous participants to re-introduce themselves). Nametags may be used again. Pass around the sign-up sheet and ask those who have not yet completed a registration form and/or a pre-test to do so.

Tape the butcher paper charts from the previous week at the front of the room to remind participants of their definitions of stress and of the effects of stress. Review the items.

Then, explain that this session will begin with an exploration of the items that participants entered on their calendars from the previous week. Ask each participant to select one event--either the most stressful one or the most enjoyable one. Then, pass out paper and crayons, instructing the participants to draw a picture of that event. Explain that this isn't an exercise to find out who is the best artist; that this is just a fun way to describe the event. The trainers also should draw pictures.

Give participants about 10 minutes (less, if they seem to be ready). Then, ask for volunteers who would like to show their picture to the rest of the group and to tell the group what the event was. If there are no volunteers, the trainers should begin by showing theirs and describing what their event was. Most people will draw a stressful event--only a few will draw something enjoyable.

It is likely that some participants will be unable to draw a picture. And many of the group members may be unwilling to show their pictures to the group. This gives the trainer the opportunity to point out some of the signs of stress, such as sweating hands, and a tight stomach, as a response to the stress of getting up in front of a group of people or showing their drawings to others. This reinforces the definitions of stress and helps groups members to recognize their own responses to stress.

The trainer may want to leave the crayons and paper out during the rest of the session, many participants will continue to use them during the session.

Ask for volunteers who would like to tell about an enjoyable event from the previous week--whether they drew a picture of it or not. If there are none, the trainer should describe one of his/hers. This can serve to introduce the concept of self-care. Point out that it frequently is very difficult for us to do things just for ourselves, with our family, work and relationship responsibilities. However, it is an important aspect of managing our stress. Depending on the composition of the group, the trainer should lead a lecture and discussion on self-care, based on the resource papers. Specific elements should include:

-Food and nutrition

-Pampering yourself

-Exercise

There will be discussion around many of the items, particularly food and nutrition. It is important that the trainer be aware of the low income status of the participants and take this into account when discussing food and nutrition. Special care should be made to ensure that relatively low cost, nutritional foods are suggested. The trainer also must be aware of the varying cultural and ethnic attitudes and practices which relate to food and encourage culturally appropriate practices. Many participants, also, will have difficulty with "pampering" themselves and will be resistant to doing it.

The discussion could become quite involved, and, in order to move on, the trainer should introduce the activity, which will help the participants to identify things that give them pleasure. This will help them feel less guilty about focusing on their own personal growth and satisfaction and will motivate them to plan activities that foster their personal growth and pleasure.

Pass out the handout, "Taking Care of Yourself," and explain that this handout will help in the process of identifying things that give us pleasure (or things that we like to do, if that phrase seems more appropriate). The trainers then should demonstrate how to complete the form, using a sheet of butcher paper as a sample form. Have the entire group brainstorm 3 or 4 things that they would see as giving them pleasure. Show that this should be written in the first column. Then, show how to use the rating columns--a star in the second column, if they have done it in the past month; an "a" in the third column, if it is something they like to do alone; and a $ in the last column, if the activity costs more than two dollars.

Once the participants understand the procedure, ask them to list as many activities they can think of that they like to do, and to complete the other columns after each of those they listed. Tell participants that they may keep all or part of the list confidential.

Give the participants about 10 minutes to complete their lists. Then, instruct them to select one of the items and explain that one of their assignments for the following week will be to plan and carry out that activity.

Instruct them to choose a partner to whom they will describe the activity they are planning to undertake. After the participants have paired up (one trainer may serve as someone's partner, if there is an odd number of participants), instruct them to explain to each other what their chosen activity is. They are each, then, to help the other plan the activity, taking into account such things as cost, transportation, babysitting, etc. The trainers may want to role play how to do this activity, picking something they would like to do, such as going to a movie, and then planning it as an example for the group: having to decide which movie to go to, find out when and where it's playing, arranging transportation, deciding whether or not to go by themselves, getting a babysitter, etc.

The trainer needs to be active during this activity, assisting and advising. Some participants will have difficulty getting started with the planning.

Give the pairs about 10 minutes to accomplish this and instruct them to make a plan to either contact each other during the week, once the activity has been accomplished, or to plan to meet prior to the next session to report on their accomplishment.

Answer any questions about the activity, and give the assignments for the following week:

1. Doing the thing they have chosen to do for themselves

2. DMR two times during the week (give copies of the DMR handout to any new participants)

3. Record on their calendars, each day, something they enjoyed about their children

Begin the DMR activity. This is a good time to reinforce permission to spend time on the DMR during the week. Many participants are reluctant to give themselves this private, relaxing time, and the trainer should allow the participants to talk about the DMR, in order to ensure that participants are comfortable.

TAKING CARE OF YOURSELF

Things I Like To Do	★	A	$
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Food and Nutrition

The trainer should focus on the following points, supplementing this with information from the other resource materials from Jane Fonda's Workout Book.

Food--how and what we eat--plays a key role in how we cope with stress. Feeling overweight, for example, can cause feelings of depression. Often, this feeling causes people to eat even more, reinforcing feelings of low self-esteem and lack of control.

In addition, feeling overweight can cause many people to drink more coffee or tea. This, of course, because of the caffeine, can aggravate hypertension, may cause lack of sleep, and/or may lead to a caffeine addiction. The "jitteriness" caused by caffeine can make it more difficult to deal with stressful situations and the lack of sleep can also aggravate stress. This, then, leads to the creation of new tensions because we are too tired to cope with events.

Other foods we eat can make a difference in how we cope with stress. When blood sugar is low, we tend to become tired, and this can lead to being short-tempered, more aggravated, and less able to cope with everyday events. Many of us reach for candy, soda, or put large amounts of sugar in our coffee at these times of low blood sugar. (If we are in touch with our bodies, we recognize these feelings.)

But, refined sugar can cause some problems for us:

1. It is high in calories, which may add to weight gain and, thus, cause depression and feelings of low self-worth and lack of control.

2. It gives a quick "high," which may be useful, but it also burns up very quickly, causing a quick "low"--even lower than before. This results in feeling sleepy or tired about one hour after a large dose of sugar.

By listening to our bodies, we learn that when we are feeling draggy and want a pick-up, we can raise our blood sugar without refined sugar. Fresh fruit, for example, is high in natural sugar, which can raise our blood sugar level without the rapid burn and downward plunge. Likewise, where we use caffeine as a pick-up (and it can be a good one, used in moderation), some people can accomplish the same effect with a glass of milk and a slice of bread.

Other foods we should be aware of as aggravators of stress include salt, which can lead to hypertension. Cutting down on salt is a slow process that involves substituting other flavors, such as lemon, pepper, and herbs. After a while, most people who have cut down on salt find that prepared or processed foods taste extremely salty to them.

Pampering Yourself with Time and Space

Pampering ourselves is an important element in feeling good about ourselves and what we do. Each of us has activities or situations which make us feel special. These are different for each of us, and we need to establish a goal of identifying these things that give us pleasure and to set aside time to do them. These can be simple things such as taking a deep, hot bath; making time to watch a favorite TV show; taking a walk; spending time outside; window shopping; doing crafts projects or other creative activities such as sewing; raising or training pets; or spending a special evening with our spouse or lover.

Finally, perhaps the single most important reason to take care of ourselves is health. The old adage, "When you have your health, you have it all," is true. We each recognize this when we are sick, which may be too late.

Taking care of ourselves means staying as healthy as we can. And, in addition to food and nutrition and pampering ourselves, exercise is an important element of health. We each need exercise and we each have a varying interest in it. Some of us jog or dance, others walk, and others workout. We each need to choose the kind of exercise that fits with our interests and our environment.

SEVEN GUIDELINES FOR A HEALTHY DIET

1. Substitute low-fat foods for high-fat foods
2. Cut down on meat--eat low on the food chain
3. Avoid salt and salty foods
4. Cut down on sugar
5. Emphasize whole grains
6. Beware of alcohol
7. Emphasize the Healthy Five:
   -Raw unsalted nuts and sesame seeds
   -Sprouted seeds such as soybeans
   -Fresh raw wheat bran and wheat germ
   -Yogurt and kefir
   -Fresh fruits and vegetables

As snack foods, processed foods and convenience foods have become the staples of the American diet, they have brought about three significant nutritional changes in our diets.

-An increase in the amount of fat we eat. Fat provided 42 percent of the average American's calories in 1976, 31 percent more than in 1910.

-A decrease in the amount of complex carbohydrates in our diets. They accounted for only 21 percent of our calories in 1976, 43 percent less than in 1909-1913.

-An increase in the amount of sugar we consume. It supplied 18 percent of our calories in 1976, 50 percent more than in 1910.

We can hardly treat ourselves worse. The woman who is concerned about her health and that of her family will substitute high-quality natural foods for low-quality potentially harmful processed and convenience foods. The following seven guidelines for a healthy diet will show you how really simple it can be to eat the high-quality way.

1. SUBSTITUTE LOW-FAT FOODS FOR HIGH-FAT FOODS.

Use skim instead of whole milk. Eat farmer's cheese, cottage cheese, feta and mozzarella instead of high-fat cheeses. In recipes calling for sour cream, use low-fat yogurt. Once you get the substitution habit, you will find dozens of ways to eliminate unhealthy fats from your meals.

From: Jane Fonda's Workout Book. New York: Simon & Schuster, 1981.

2. CUT DOWN ON MEAT.

Frances Moore Lappe, author of Diet for a Small Planet, urges us to "eat low on the food chain," because pesticides that do not easily break down accumulate in the fat of animals and fish. When a large fish eats a smaller one, when a cow eats grass or a chicken eats feed, whatever pesticides were present in the smaller fish or grass or feed are retained in the fat of those who are higher up in the food chain. And when we in turn eat fish and meat and poultry, those pesticides start building up in our own bodies. By eating low on the food chain -- and that means vegetables and grains -- and by sticking to low-fat dairy products, we can reduce the amount of pesticide residues accumulating in our bodies.

The accumulated toxins from the environment are not the only danger in today's meat supply. The way livestock is raised has been fundamentally altered -- for the worse. The only one benefiting from the change is the meat supplier.

The deer and the antelope may be the only ones still at home on the range these days. The cattle that once roamed there are now crammed flank to flank into feedlots where they spend their short lives. In the days when they grazed the range, cattle were not considered mature enough to slaughter before they were three or four years old. But in the feedlot where they are under artificial lights twenty-four hours a day and fed almost constantly, cattle are fattened quickly and cheaply and are slaughtered after eighteen to twenty-five months.

This increased efficiency results in high profits, but it also subjects the animals to stress and an increased risk of respiratory and other diseases. To minimize these risks and relieve the stress, they are given antibiotics and tranquilizers. It is estimated that close to 90 per cent of the beef and poultry raised for market in this country have been on antibiotics and other drugs all their lives. Antibiotics as well as synthetic hormones and other chemicals are also added to livestock feed to stimulate growth and weight gain. Their residues are often found in animal tissues -- and are not eliminated through cooking.

These "second-hand" doses of antibiotics such as penicillan can upset some people's gastrointestinal processes and cause allergic reactions. Health authorities are concerned that constant exposure to antibiotics in the meat we eat can help disease-causing microbes to build up immunities, so that if illness strikes these drugs may have lost their effectiveness against it.

When livestock is allowed to graze freely and mature naturally the fat stored in their bodies is largely unsaturated. But the fat in feedlot-raised cattle is almost entirely saturate. Some health-food stores and butchers supply meat from animals that have been raised naturally. If you cannot find a source for this meat, at least try to buy fresh meat and insist on its being cut in your presence. Ask to see the inspection and grading mark and be sure that all excess fat is trimmed.

The same holds true for poultry. Whenever possible I buy what are called free-range chickens. Most commercially sold chickens have been raised

indoors in such a confined space that they can hardly move, and have been fed on chemical mush. They have never been out in the sunshine or seen a rooster. Their eggs are infertile.

Free-range chickens are raised outdoors with roosters. They feed on grains, seeds, insects and worms, and are not given synthetic foods or chemicals. Their eggs are fertile and have a higher vitamin content, less saturated fat and a higher nutritional value than those of poultry raised in commercial brooders.

Remember, you do not really need either poultry or meat as long as you eat enough fresh, natural plant protein (beans, brown rice, cereals) and non-meat protein (eggs, milk, cheese). When you do buy meat, choose free-range chickens and turkeys rather than beef. Whenever possible, consider fish as an ideal substitute.

3. AVOID SALT.

This means avoiding salty foods as well. Sodium from salt and additives such as monosodium glutamate increases the risk of developing high blood pressure, which causes some 20,000 deaths a year and is a major factor in 900,000 deaths from stroke and cardiovascular disease every year. Salt also causes fluid retention.

I used to love salt and added it to everything, but during my first pregnancy went cold turkey and cut it out all together. It was hard at first, but I soon found I was appreciating the more subtle flavors in food. I have become very sensitive to salt now and do not like the taste any more.

There is enough salt in the foods you eat without having to add more. Don't add it in cooking and don't salt the food on your plate. If you simply must salt you food, use Vegit instead, the way we do. This is a powdered herbal and vegetable salt-substitute made by Gayelord Hauser.

4. CUT DOWN ON SUGAR.

Take sugar off your grocery list -- and forget about brown sugar too, which does not offer significantly more nutrients than white. If you need a sweetener, use uncooked honey, which besides containing copper, iron, calcium and potassium -- in addition to other important minerals -- and all nine essential amino acids, is a mild laxative and sedative as well.

Americans now eat 130 pounds of sugar per person a year. This is more than a third of a pound daily for every woman, man and child. Besides being devoid of nutrients, sugar is a full-time promoter of tooth decay, obesity, heart disease and diabetes. It disguises itself cleverly. You will find it listed on labels as corn syrup, dextrose, maltose, glucose and invert sugar.

5. EMPHASIZE WHOLE GRAINS.

If you eat breads and cereals, they should be made of whole grains.

6. BEWARE OF ALCOHOL.

Use it in moderation if at all. It is high in calories, low in nourishment and can cause liver and brain damage.

7. EMPHASIZE THE HEALTHY FIVE.

The following five groups of foods should be included in your diet as often as possible:

Raw unsalted nuts like almonds, sesame seeds and sunflower seeds. These are high in fiber and packed with vitamins;

Sprouted seeds such as soybeans, mung beans, alfalfa, which you can sprout yourself at home;

Fresh, raw wheat bran and wheat germ;

Yogurt and kefir, which many people find aid digestion and increase resistance to infection;

Fresh fruits and vegetables and their fresh juices.

If you give yourself just a little time, you will develop a real preference for natural food. Foods that are adulterated and oversalted will seem revolting. How much more pleasurable a cold, juicy, fresh peach is than a soggy, slippery, syrupy canned one! And the canned peach has more calories.

My family and I follow these seven guidelines. Neither our friends nor the children's friends seem to notice that there is no white sugar, white bread or soda pop or candy in our house except on the most exceptional occasions like a birthday. Processed foods are at a bare minimum on my shelves and sugary breakfast cereals are just not there.

When Tom and I realized that our son, Troy, was singing along with the Froot Loops commercial on TV and punctuating every other ad for a sugary cereal with, "Mom, get us some!" we decided to have a little talk with him. We explained that the big companies that make these products spend a lot of money trying to persuade children to want these cereals so they can make more money. "It's as if they get inside your brain with the commercials," I said, "and make you think these things are good for you even when they're not. So when you watch the commercials, think about what they're trying to put over on you and don't let them." He got the message. Not long ago as he was watching a commercial on a children's TV show while I was in the kitchen getting dinner, he called out to me, "They're trying to get inside my mind agin, Mom!"

These days Troy is quite satisfied with the Familia, shredded wheat with added wheat germ, cream of wheat and oatmeal (not the instant kind) that I give him for breakfast.

We eat brown rice instead of the "enriched" white mockery of the stuff and we eat a lot of fresh fruit and drink fresh juices. It is still a bit of a battle to get the children to eat a variety of vegetables. Since they both prefer their vegetables raw, that is how they get them -- raw in salads.

After I learned that pasteurization destroys many of the essential vitamins and enzymes in milk, I turned to non-fat certified raw milk instead. Its minerals, protein and fatty acids are easier to digest and assimilate. Thanks to present-day sterilized dairy facilities and refrigeration, one can drink certified raw milk without risk.

I also use a dietary supplement known as brewer's type yeast flakes. Yeast is a rich source of the B-vitamin complex, magnesium, potassium and calcium. The way I take it is to dissolve several tablespoons of the flakes in a cup of hot water and add a dash of cayenne or capsicum pepper to give it a little zip. It tastes something like chicken broth. I find it is a wonderful energizer, and I drink two or three cups a day instead of coffee.

Unprocessed bran is another important dietary supplement that I use. A high-fiber complex carbohydrate, bran is rich in niacin, iron and thiamine.

I always carry my yeast flakes and bran with me whan I travel. They seem to help me get over jet lag and make my system feel in balance again. I usually add the bran to yogurt or scrambled eggs.

I like to go to bed slightly hungry and eat a hearty breakfast in the morning. I usually have fresh fruit like melon, strawberries, grapefruit or papaya, and a couple of eggs that I scramble in safflower oil. I may add dried minced onions or fresh herbs and Vegit to them. And I'll have a piece of toast once in a while, made from seven-grain, sprouted wheat or whole wheat bread that contains no preservatives.

Another favorite breakfast of mine is a terrific protein drink. I put some non-fat milk, fresh organic apple juice, strawberries or peaches that I have frozen first, a banana and sometimes a papaya into the blender. I may add wheat germ or bran. And then I add protein powder. (When you buy protein powder, try to find one that contains no sugar, no preservatives, no artificial colorings or flavor and no soya. The protein powder I use is made from milk and egg protein and I believe it is more easily digested and absorbed by the body than powders made from soya protein.) Then I blend the whole thing until it is smooth and thick. This super fruit milkshake is low in calories, satisfies my sweet tooth and usually fills me up so I don't want to eat again until the middle of the afternoon.

This raises the question of when you should eat. My recommendation is that you should eat only when you are hungry -- not because it is one o'clock or whatever. There is research which indicates that what you eat early in the day is less fattening than what you eat at night. The reason is that your body functions differently at night. If you have your major meal during

the day, it will be absorbed while your blood circulation is active. But if you eat a large meal in the evening, the fatty contents of your meal will be absorbed by a sluggish bloodstream. It also forces your digestive system to work overtime while you sleep.

There is another good reason for having your major meal during the day. If you have eaten lightly all day, your blood sugar will be low at night and you will probably eat more than you need. In other words, you will binge. And if you are trying to lose weight, you have defeated yourself. All that depriving yourself during the day is canceled by overeating at night.

One of the great dieting booby traps is the need you may feel for a pick-me-up during the day. It usually comes around the same time, which means that your blood sugar level has dropped. This happens to everyone at some time, but it is accentuated when you diet. Your impulse is to reach for something sugary for quick energy. And that is the worst thing you can do to yourself.

I protect myself against the sugar urge by carrying an apple or some other fresh fruit with me. The natural suger in the fruit will raise my blood sugar level, appease my hunger the natural way and give me energy without the high jolt of refined sugar and the precipitous, almost sickening drop that follows.

The woman who wants to eat for health and also wants to lose weight should understand that there is really only one way to do it. You must decrease the amount of food you eat and increase the amount of exercise you get. That is all there is to it. Starving, crash diets or subsisting on small amounts of junk food is not the way to lose weight. You will gain the pounds back as soon as you return to your normal eating habits. When food becomes the enemy with which we are locked in an obsessive power struggle, then every time we lose the fight we not only gain weight but we lose our self-esteem as well. I know. I've been there.

The best and easiest way to change your attitude about food is to put it in its proper place. Think of it as it really is -- fuel for your body. So instead of focusing your anxieties on food call off the fight, declare a truce and accept food as a life-giving friend. When you are dieting you want to give your body the best fuel available -- which means food that is low in calories, but natural and wholesome and as free from contaminants as possible. Your best course is to eat the high-fiber, complex-carbohydrate, low-animal-protein, low-fat diet that I have described in this chapter. Just eat less of it and increase your exercise.

Whether or not you are on a diet, I suggest that the woman who wants to eat for health and beauty make a habit of reading food labels before she buys any processed food. This is the eaiest way to know what you will actually be eating. Once you read the label, you might just change your mind and put the processed food right back on the shelf.

Labels give the ingredients in descending order of the amounts, so if sugar is the first or second ingredient listed, you just know that that food, whatever it is, does not belong on a health diet. You should also avoid

products that contain such questionable additives as nitrates, saccharin, sodium, artificial colorings and petroleum additives such as BHA and BHT.

There has been conclusive evidence in the last few years that a few of the chemical additives in our food, acting alone or when combined with other chemicals in the stomach, can cause cancer. Some of the chemicals that appear to promote cancer include saccharin, sodium nitrate, BHT and red dye No. 40.

In response to the studies showing these additives to be carcinogens, the food industry argues that the doses administered to the rats in the tests were much larger than humans would ever ingest, their assumption being that a small dose of a cancer-causing substance poses no risk. But cancer experts maintain there are no safe doses of carcinogens. If a large amount of a substance can cause cancer, then a small amount of the same substance can also cause cancer -- but less often or over a longer span of time.

The experts believe there may be a threshold for carcinogen exposure, that small doses of a substance accumulate over time and that even a very weak dose of a carcinogen may be all that is needed to push the body's total carcinogenic burden over the threshold into cancer.

We are all exposed to carcinogens every day. From some foods (moldy peanuts, for instance); from air and water pollution; from X rays and the ultra-violet rays of the sun. These exposures alone could bring your body near its carcinogen threshold. We can do nothing about some of these exposures, but why should we increase our risk of cancer by knowingly ingesting even a small amount of a proven carcinogen? It could be the straw that breaks the camel's back.

I urge you to respect the complexities of your biochemical processes, which directly affect your moods, your health and your energy-level. The woman who respects the needs of her body will junk the junk food and start eating foods that are as close to their natural living or growing state as possible.

She will teach her children to respect their bodies and eat only the foods that are good for them. Tom and I have spent a lot of time explaining to Vanessa and Troy why we ask them to eat more of some things and less of others. We have explained why the red coloring in the maraschino cherries they love is dangerous for them and that the sodium nitrate which is used to preserve, color and flavor hot dogs can cause cancer. We have found that when they really understand what is good and bad for them, they tend to guide themselves.

I remember, for instance, going to a movie with them. We hadn't had lunch yet and were hungry so I asked if they wanted a hot dog. Vanessa put her hands on her hips and said, "Mm-o-om," turning it into a three-syllable word the way she does when she disapproves of me. "You know they're bad for us."

"Hallelujah!" I thought.

SESSION III: CHILD DEVELOPMENT AND PARENTAL STRESS

1. Introductions, review of previous session, participants meet with partner and tell the group what they did for themselves during the previous week — 25 Minutes

2. Lecture/discussion of child development and parental expectations related to developmental issues, drawing on both handouts — 60 Minutes

3. Deep Muscle Relaxation — 30 Minutes

4. Assignment for the following week:

   a. Deep Muscle Relaxation practice

   b. Calendar: record something they enjoyed doing and situations of anger or frustration with being a parent

MATERIALS/SUPPLIES NEEDED

1. Handouts: "Survival Hints for the Open Trail" and "Ages and Stages--Development of Children"

2. Butcher paper, marking pens, tape

3. (Optional) A large version of the "Survial Hints for the Open Trail" handout, which can be taped to the wall

SESSION III

Introduce new members to the group and ask each participant to meet with his or her partner from the previous week to talk about the activity he or she decided to undertake during the previous week. Each pair, then, should report to the group what they did.

It is likely that many, or all, of the group members will not have accomplished their planned activity. The trainer should allow sufficient time for group members to report on what they had planned to do and what got in the way of accomplishing it, if this is the case. The other group members, those who did do the things they had planned to do, also can report at this time. This is a good time to review the previous session on self-care, pointing out how difficult it is to do and how important it is to give ourselves enjoyment.

This also is an appropriate time to ask participants about Deep Muscle Relaxation at home. Are they practicing it? If not, what is getting in the way of doing it? What are the difficult parts of it? It is important that participants have the opportunity to say that it's not working for them. There likely will be many group members who are having difficulty. Often, participants will feel that they don't have the time, or the proper place to do it. Also, those who are just beginning sometimes place a great deal of pressure on themselves to "do it right." The trainer may want to offer some suggestions, such as visualizing numbers, counting backwards from 10, while breathing deeply, prior to the tensing and relaxing of muscles, and explain that there is no "right way."

After this discussion, the trainer should ask the participants to look at the handout, "Survival Hints for the Open Trail." Depending on the group's size, the trainer may want to divide into small groups, but a full-group discussion of the handout works well, with the trainer facilitating a discussion of the developmental tasks of each age. In order to ensure that every participant is included, ask the ages of each group member's children, and mark them on the large version of the handout, if one is available. This "walking through" of the handout generally can last as long as the trainer wishes, although an hour should be sufficient time. During this discussion, the trainer will need to add information, to be alert to the special needs of each participant, and make sure that each participant has a chance to be involved.

Explain that this discussion will continue during the next session.

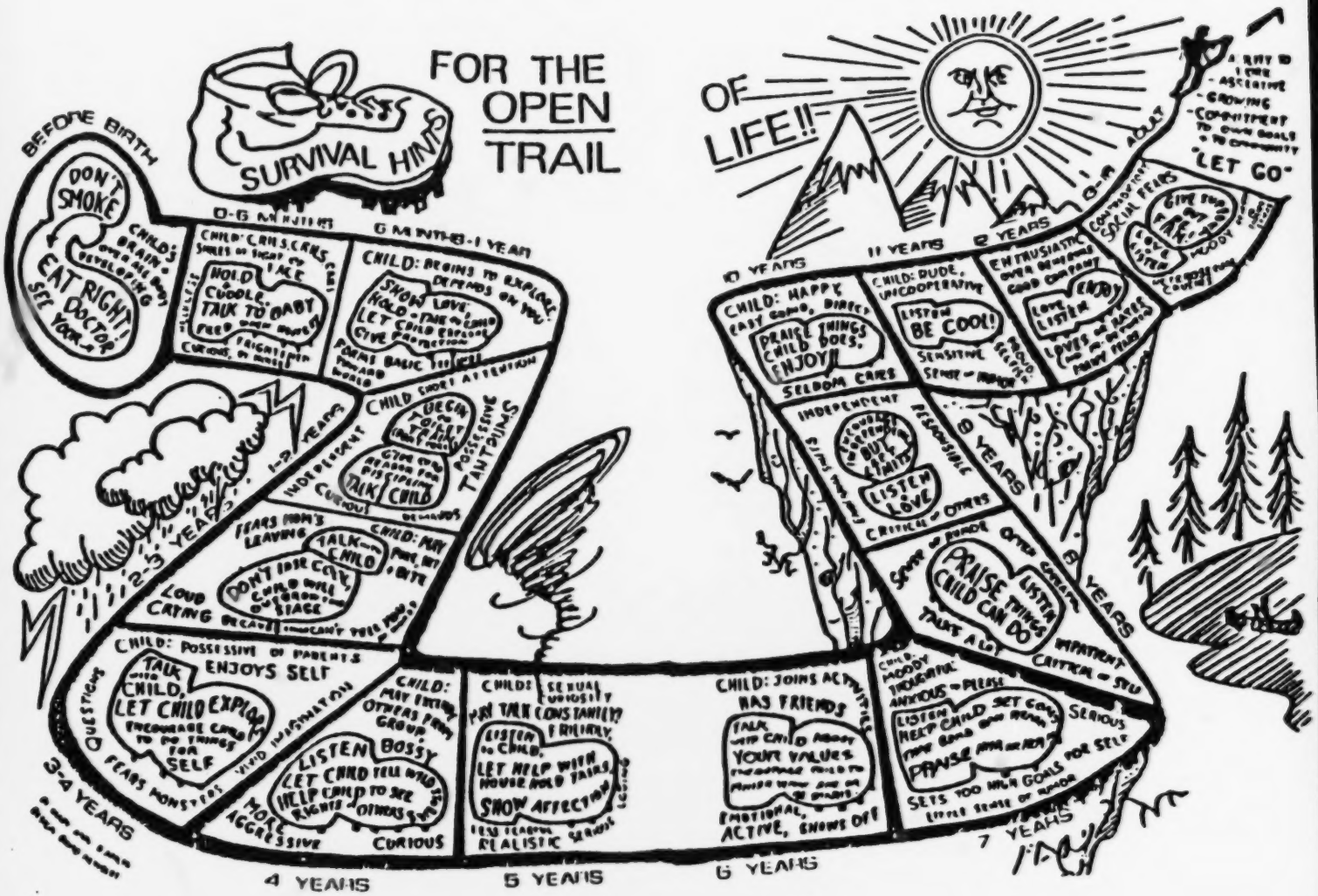
Announce the assignments for the following week:

1. DMR practice

2. Record on their calendars something they enjoyed doing during the week and situations of anger or frustration with being a parent

3. Read the handout, "Ages and Stages--Development of Children"

Conduct the DMR exercise.



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AGES AND STAGES
DEVELOPMENT OF CHILDREN

Reprinted from The Nurturing Program for Parents and Children by Stephen J. Bavolek and Christine Comstock, Family Development Associates, Inc., Schaumberg, Illinois, 1983.

Developmental Stages

Developmental stages are periods of time children grow and learn new behaviors. At each stage, children are capable of doing only certain things because of their size, age, and maturity. The older they get, usually the more they can do.

What kinds of Developmental Stages are there? There are four general kinds of developmental stages:

1. Physical development means that as children get older they usually get bigger. Usually when they get older and bigger their gross motor and fine motor skills increase. Gross motor means activities like running, throwing, jumping, crawling, etc. Fine motor means activities like writing, holding a fork and knife, using scissors, etc. Physical development is important for helping children not only increase their skills but also organize their behaviors.

2. Intellectual development means that children learn more the older they get. They learn to recognize shapes and colors, recite the alphabet, figure out problems, and numerous other things. These intellectual abilities continue to increase as children continue to grow.

3. Language development generally means that as children grow older, their communication skills increase. Their abilities to use words, phrases, and sentences in writing and in conversation help them gain mastery of their environment by expressing their needs and understanding the needs of others. Language expands from a few simple sounds during the first year of life to the use of thousands of words in their teen years.

4. Social and Emotional development go hand-in-hand. The way children are treated and the care they receive affect the way they mature and are capable of interacting with others. Children's emotional growth generally goes from an early stage of dependence and taking to a later stage of independence and giving.

Everyone goes through stages of growth. All children go through developmental stages as they grow and mature into adults. In fact, developmental stages continue right into old age. We all go through stages; some of us faster than others and some of us more thoroughly than others.

A word of caution. No child is "average" in all areas of growth. Children are unique. Some are better at doing certain tasks than others. Development is influenced by the experiences and opportunities children have to learn, as well as the abilities they are born with.

What Developmental Stages Tell Us

At different times in our lives, from infancy to adulthood, we are capable of doing certain things like running, lifting heavy objects, talking, feeding ourselves, being able to care for someone else, etc. Developmental stages actually serve as rough guides for giving parents an idea when children may be capable of performing desired behaviors. They are not meant to serve as the final word on children's abilities. Not all children are capable of performing a behavior just because a stage indicates they are, but generally knowledge of developmental stages gives parents a good idea what children may be capable of doing.

Why Learn About Developmental Stages?

We learn about developmental stages because we want to become the best parents we can. We also learn about developmental stages because it makes the life of an infant and young child easier and happier. Being an infant is not always that pleasant. There are very few things infants can do by themselves besides sleep, cry, wet and soil themselves, and burp. They even have to learn to turn over when they are lying on their backs. It's not that simple. Life gets easier as infants get older because they can do more things independently.

But imagine if parents didn't know what infants or children were capable of doing at different times in their lifes. Childhood would be a frustrating experience. We might be asking small infants to feed themselves, or young children to set the table, cook the meals, and do the dishes. When such inappropriate expectations are placed on children, the children can't complete the task, and they begin to feel badly about themselves.

Developmental Stages and Self-Concept

When we complete a task, no matter if it is a large or small one, we usually feel we have accomplished something. People often notice our accomplishments and usually paise us for our efforts. The praise we receive helps build in us a positive feeling about ourselves, or a positive self-concept. Trouble begins to occur when we constantly fail to accomplish something. No one recognizes our efforts and we don't receive any praise. In fact, we often receive just the opposite--criticism about how we can't do anything or how bad we are. When this happens often, we begin to believe we can't do anything and begin to feel badly about ourselves. A negative self-concept grows.

The importance of development and self-concept is extremely critical in the growth of children. A self-concept begins very early in life, based on how capable we feel we are in pleasing our parents. After all, children want to please the very people they are dependent upon. When the expectations placed on children or infants are inappropriate, that is, children can't complete the task or do the activity because they are too young and don't have the skills, children see themselves as failures. Failures are children who can't seem to please Mom and Dad no matter how hard they try. When Mom and Dad are not pleased, they don't offer any praise. Without praise from their parents, it is nearly impossible for children to feel good about themselves and develop a positive self-concept.

Without a positive self-concept, the chances of children trying new tasks or being successful are slim. This failure carries over to school where children will often see themselves as incapable and less bright than the other children.

What is Important to Learn?

Listed in the following pages is information about developmental stages you should know. Having a good working knowledge of what your children can or can't do will help you in having appropriate developmental expectations for your children. In turn, you will encourage your children to meet success and reinforce positive feelings about themselves.

The following developmental summaries of children serve as a rough guide to normal child development. It should be noted that the lists serve only as a summary and are not a complete index of all the things children can do at any given stage. Children born with birth problems such as prematurity, low birth weight, or illness may not be able to do the things that other children can do who had no problems at birth. It is likely such children will be behind and will need more time to catch up. Only with the support of their family will handicapped children, or children with special developmental needs, grow to the fullest of their capabilities.

Developmental Stage: Infancy
Chronological Age: Birth to One Year

The first year of an infant's life is both fascinating and startling. For years psychologists have thought that babies were incompetent creatures who were unable to comprehend the world around them. Today we know that is untrue. At six to ten days, the newborn can recognize the mother by her smell. Some studies reveal that newborns can move their bodies in rhythm to the meaningful speech of adults. Babies at two weeks will look at their own mothers more frequently than they will look at strangers. It is apparent that very young infants can begin to make some sense of their new environment. In their first year, as they grow older, their body language, intelligence and social interactions also increase.

Physical Development

The major part of the infant's first year is devoted to survival. The infant is completely helpless at birth and is totally dependent upon the parent(s) for nurturance. Being fed, held, touched, looked at and talked to have significant impact on the growth of the child. By the end of the first year, an infant will have acquired many skills.

a. Automatic reflexes such as hand-to-mouth. (0-2 months)

b. Will use eyes to follow you. (2 months)

c. Will lift his head when on his stomach. (2 months)

d. Sucks his fingers. (2 months)

e. May be pulled slowly by hands to a sitting position. (2 months)

f. May be starting to teethe. (4 months)

g. Can sit up by himself for a short time. (7 months)

h. Can begin to crawl by pulling self forward with arms and dragging legs and stomach. (7 months)

i. With help of furniture can pull self up to stand. (7 months)

j. Likes to pick things up and drop them only to pick them up again. (7 months)

k. Feeds himself pieces of food with hands. (7 months)

l. Starts practicing walking but continues crawling. (10 months)

m. Likes to eat meals using fingers, using one hand more than the other. (10 months)

n. Begins a tottering walk with legs wide apart. (12 months)

o. Sits independently on hard surface. (12 months)

Intellectual Development

Physical and intellectual development are closely related to one another. The child learns about the world through exploration of objects, by moving around, and through interactions with the parent(s). Jean Piaget, a Swiss psychologist, helped us understand how children learn. He believed that intelligence involves adaptation to the world. Such adaptation means that the individual is capable of interacting effectively with the environment. The behavior of infants during the first year, and subsequent years, is to help them understand, adapt and interact effectively with their world.

a. The language of a newborn is crying. Crying occurs without tears for a special reason: to have her needs met. (0-2 months)

b. Reflex behaviors are practiced, like sucking. (0-2 months)

c. Begins to recognize familiar voices or faces. (0-2 months)

d. Responds to strangers by crying or staring. (2 months)

e. Likes repetition of simple acts like sucking, opening and closing hands, etc., for sake of activity.

f. Baby still cries but also laughs out loud. (4 months)

g. Can imitate sounds. Watches your mouth with interest when talking. (7 months)

h. Child repeats an act to observe change in the environment. Baby kicks mobile to make it go. However, actions are not organized with a purpose; rather, the goal is discovered accidentally in the process of activity. (6-8 months)

i. Follows moving objects with eyes. (0-12 months)

j. Child uses responses to solve problems and to achieve some goal. For example, a child may move one object to get at another. (12 months)

k. Responds to and imitates facial expressions of others. (5-12 months)

Language Development

Language develops very slowly during the first year of life. At birth babies cannot say anything. By the end of their first year, the vocabulary increases to about three words. Even though language is not present during the first year, the experiences the baby has form a crucial basis for the development of language during years one through four.

a. Responds to speech by looking at speaker. (0-12 months)

b. Makes crying and non-crying sounds. (0-12 months)

c. Babbles by repeating some vowel and consonant sounds. (0-12 months)

d. Attempts to imitate sounds. (0-12 months)

e. Babies begin to "understand" many words or phrases such as "no, come, bring," etc. (12 months)

Social/Emotional Development

The stages of social and emotional growth are described by Erik Erickson. In the earliest stage, birth to one year, the child struggles with learning to trust or mistrust her environment. The degree to which a child comes to trust the environment, other people and himself depends to a considerable extent upon the quality of the care the child receives. The child whose needs are met, whose discomforts and fears are quickly removed, who is held, loved, played with and talked to, develops a belief that the world is a safe place, and that people are dependable and helpful. The child who receives inconsistent and inadequate care, and who is rejected, develops a basic mistrust of others, his environment, and self. For this child, the world is not a safe, fun place to be, and people are not to be depended upon to have needs met. Although the child is actively involved in developing trust or mistrust in the first year, this same issue arises again in each successive stage of development.

a. Likes high-pitched voices and will usually quiet down when he hears them. (0-2 months)

b. Smiles spontaneously. (0-2 months)

c. Loves to be played with and likes to be picked up. (4 months)

d. Responds differently to strangers (may cry) than to familiar persons. (4-6 months)

e. Babies may give joyful kicks and gurgle and laugh to engage mother in play. (5 months)

g. May become attached to particular toy. Play time is important. (7 months)

h. Child is beginning to learn to be independent. He may go a little away from you, but will quickly return. (10 months)

i. Child will express anger (through crying) if some wish for mastering a task is frustrated. (8-10 months)

j. Child loves an audience and will repeat any behavior that gets it. (12 months)

k. Tantrums may occur. Based on needs and limited abilities, a child may desire to have or to do something that cannot be achieved. (12 months)

1. By the end of the first year, a baby experiences and expresses anger, joy, anxiety, fear, surprise and curiosity.

Developmental Stage: Toddler
Chronological Age: One Year to Three Years

Life with toddlers is rarely dull. Their busyness, intensity, curiosity, independence and increasing verbal skills make them both exciting and frustrating for parents. Parents are often pleased by some of the observations they verbalize, and sometimes outraged at their stubbornness. This stage has often been called the "terrible twos" because of the child's increased need to explore the surroundings, and gain control over the environment. Both expressive language and physical mobility increase during this stage. The toddler is in a rush to discover her new style of living.

Physical Development

By the end of the first year, the average one year old is between 27 and 29 inches in height and weighs approximately 22 pounds. By the end of the third year, height has increased to around 36 inches and weight to 35 pounds. Although growth in the second and third years is slower than infancy, it still occurs at a rapid pace.

Large Muscle Development (Gross Motor)

a. The child should be walking better. Feet are more parallel and she can walk without holding arms up for balance. Child usually can walk backwards. (15 months)

b. The toddler can pick up things from a standing position without falling. Now that hands are free, he loves to carry things, expecially big things. (15-18 months)

c. Child likes to push or pull toys; loves to throw things (15-18 months)

d. Seats self in child's chair; moves to music. (18-24 months)

e. Runs, jumps, climbs and stands on chair, walks upstairs, crawls downstairs backward, kicks at ball, loves pounding, tugging, lugging, dumping. (18-24 months)

f. Climbs small ladder. (around 36 months)

g. Walks on tiptoe; stands on one foot with aid. (24-36 months)

Small Muscle Development (Fine Motor)

a. Combines use of several objects: hitting one object with the other; dropping small things into large containers. (15-18 months)

b. Begins to use spoon to eat; drinks from a cup that is held. (18 months)

c. Turns several pages at a time; can make a straight stroke with pencil or crayon instead of just a scribble. (18 months)

d. Can turn a doorknob, builds tower of many blocks. (18 months)

e. Turns pages singly; drinks from a cup without help. (24-36 months)

f. Removes shoes, pants, socks, sweater, unzips large zipper. (24 months)

g. Snips with scissors; holds crayons with thumb and fingers, not fists; paints with wrist action; makes dots, lines, circular strokes. (24-26 months)

h. Uses one hand consistently in most activities. (24-36 months)

Intellectual Development

The increased exploration and discovery of objects within the environment lead to activities that expand the child's understanding of the world. According to Piaget, at eighteen months the toddler's interest is directed beyond his body. Toddlers begin to understand that each object has an independent existence and permanence. Such understanding leads to exploration of these objects and how they work. She learns that a chair remains the same whether seen from above, behind, or underneath.

From eighteen months to two years, children are limited to immediate experiencing of objects, people, and whatever or whomever else is present at the moment. A lot of time is spent staring at objects, people, or events as a way of exploring the world. The beginnings of language use and memory occur around two years. By three, children are able to remember events, people and activities they observed in the environment. Memory expands dramatically. It helps the child to learn language. During two and three years of age, language develops rapidly, imaginative and imitative play increases. Parents are often surprised at what children are later able to remember and imitate.

a. Toddlers are curious about textures--they like to stroke a cat or dog and rub their cheeks against the fur. (18 months)

b. Toddlers are attracted to water and to toilets and enjoy playing in the bathroom. (18-24 months)

c. Imitates actions and words of adults. (18-24 months)

d. Recognizes difference between you and me. (18-24 months)

e. Has limited attention span; accomplishes primary learning through exploration of environment. (12-24 months)

f. Responds to simple directions ("give me the block; get your shoes.") (24-36 months)

g. Recognizes self in mirror; can talk briefly about what he is doing. (24-36 months)

h. Has limited sense of time: vaguely know idea of past and future and knows such terms as "yesterday" and "tonight," although they may be used incorrectly.

Language Development

Babies begin to produce a few basic words at about a year of life. By 24 months, most children are speaking phrases and have a wide range of words. A two year old has a vocabulary of perhaps 50 words and increases to about 900 words by the age of three.

Many factors contribute to the development of language in a child. A strong, emotional relationship with mother, enhanced by the amount and quality of time spent together, and the amount of talking, asking questions, and responding to what the child says increases the child's verbal activities.

a. Says first meaningful words. (12-24 months)

b. Uses single word plus a gesture to ask for objects. (12-24 months)

c. Refers to self by name; uses "my" or "mine" to indicate possession. (12-24 months)

d. Toddler likes to talk to self; replaces baby language with sentences; likes to repeat words. (24 months)

e. Joins words together in two-word phrases, e.g., "see doggy." (24 months)

f. Asks what and where questions. (24-36 months)

Social/Emotional Development

Autonomy vs. Doubt

Parents of toddlers have an overwhelming job. The child continues to be needy and dependent but at the same time is growing and developing into an independent person both physically and emotionally. According to Erickson, the second and third years of a child's life focus on the emergence of autonomy. This autonomy is built upon the child's new motor and mental abilities. The child takes pride in his new accomplishments and wants to do everything himself. Whether it is pulling the wrapper off a piece of candy, wanting to dress herself, or flushing the toilet, the child wants to demonstrate her competence at completing the task.

The importance of the stage reflects upon the willingness of parents to allow the child to express his autonomy. If parents are impatient and do for the child what she is capable of doing, they create a sense of shame

and doubt. Overprotectiveness, criticism, abusive treatment, and inappropriate expectations foster feelings of "I'm not capable" or "I'm not worthy." Such doubt or shame will handicap a child's attempts to achieve autonomy in adolescence and adulthood.

Parents need to help a child explore and grow during this stage. To accomplish this task, parents can:

1. Provide a safe environment for the child to explore. "Baby proof" the house. Remove breakables and eliminate hazards.

2. Provide a creative environment for the child to explore. Use creative toys and games to facilitate learning.

3. Be involved in the child's exploration. Talk to the child to reinforce natural curiosity and exploration of the environment.

Separation from Parents

Children quite frequently get upset at separation from the parents, particularly from mother. The emotional tie that is developed between mother and child results in the child wanting to be with the parent. Crying at separation is normal. Throwing temper tantrums at separation is a sign of possible problems.

Research has shown that children who are positively attached to their mothers devleop a sense of trust and feelings of security. Securely attached toddlers are outgoing preschoolers who are well-liked, attack new problems vigorously and positively, and can accept help from others. They are sympathetic to others, self-directed and goal-oriented, and exhibit high self-esteem and self-confidence.

Toddlers who are not positively, emotionally attached to the parents, particularly to mother, exhibit problem behaviors. Such children are anxious, throw more tantrums when presented with problems, are more negative in response to mother, ignore and oppose her in many ways. Children who feel less securely attached to mom fear separation. The fear can turn into panic during actual separation. To minimize the fear, a strong attachment needs to be established between mother and child. Feelings of security need to be developed, and assurances that mother will not abandon the child need to be expressed.

Assertiveness

As the toddler becomes more aware of self, more independent, more definite in what she/he can and cannot do, the child will become more assertive in interactions with parents and peers. "No" becomes a common word. "I want," "I need," and "More" are other phrases and words frequently expressed in the toddler years. Children also like to command parents, sometimes adopting dictatorial tones of "Do this!" or "Do that!"

Assertion turns to frustration and anger when the toddler cannot accomplish what he set out to do. When parents exert limits (discipline) designed to manage the child's behavior, the child may express her anger physically--yelling, crying, temper tantrums, holding breath, or throwing objects. The

physical activities release the tension that the child cannot express in words. Consistency in ignoring undesirable behavior, praising desirable behavior, and punishing unacceptable behavior through time-out, loss of privilege, etc., will help the toddler negotiate this stage of development. As children become more capable and competent in achieving their ends, the tantrums will decrease.

Toilet Training

Most experts agree that somewhere between 18 and 24 months, children are ready to be toilet trained. However, it is important for parents to know that just like eating, toileting is an area they cannot control, and the first area children learn that they <u>can</u> control. Therefore, in an extreme struggle of wills in toilet training, the child will win. An approach that helps the child lessen her need to control this area is generally more successful. Several hints are offered:

1. Three guidelines exist for determining a child's readiness for toilet training:

   a. Bladder control (the ability to stay dry for several hours);

   b. Physical readiness (the ability to get to the toilet and pull pants down);

   c. Instructional readiness (the ability to understand instructions and communicate needs).

2. Don't make a big deal out of toilet training. Do not talk about it much or give much praise, because then the child can use the achievement to frustrate parents if he gets angry.

3. Establish a toilet routine. There are many books available on how to establish such a routine.

4. Use a potty chair. It is less frightening than a toilet.

5. Have the child observe the parent or sibling in the bathroom as a model.

Developmental Stage: Preschool
Chronological Age: Three Years to Six Years

The preschool period in a child's life is an exciting time. During this time the children reach out to the world beyond home. For them the world is an exciting place with many things to do, to touch, to experience, and to eat. Although the preschool child cannot read, write, or compute logical processes, his quest for knowledge overrides any developmental limitations. The preschool years set the stage for experiences, friends, and accomplishments obtained outside the home.

Physical Development

In comparison to earlier stages of development, the physical growth of the preschool child has slowed down considerably. Nevertheless, preschoolers usually gain two and one-half to three inches in height each year, and three to five pounds in weight. By the age of five years, preschoolers are 42" tall and weigh 40-45 pounds. They physical growth of the brain achieves about 90% of its adult size around the age of five.

The growth of the brain facilitates control of voluntary movements. Old skills are refined and elaborated and are put to new use. The basic motor abilities are present.

Large Muscle Development (Gross Motor)

a. Takes longer steps when running or walking. (5 years)

b. Catches large ball. (4-5 years)

c. Skips on one foot. (4-5 years)

d. Hops on one foot. (4-5 years)

e. Many can broad jump 28 to 35 inches. (5-6 years)

Small Muscle Development (Fine Motor)

a. Can draw, use scissors, and begin to color. (4-6 years)

b. Can get close to drawing a person. (5 years)

c. Can begin to read, write. (5-6 years)

d. Can copy shapes--can draw square and triangle, probably not a diamond. (5-6 years)

e. Can paint with broad strokes. (5-6 years)

Intellectual Development

Preschoolers are intellectually curious and actively seeking to learn as much about their environment as they possibly can. According to Piaget, the child is in a stage where she learns to represent objects, persons, and perceptions with symbols. These are the beginnings of functional language.

The child is no longer tied to what is physically present.

Questions begin during the preschool years, first about the names of objects and activities, then about the purpose of routines. Increasing questions, dreams, nightmares, and fantasy in play are all indications of advances in intellect.

During the preschool period, children believe everything exists for a purpose, even themselves. The child's questions usually reflect such interest: "Mommy, why is there rain?" "Where do babies come from?" Where was I before I was born?" Do I have to die?" David Elkind, a noted child psychologist, suggests that parents answer such questions in terms of purpose or function. "It rains to make the trees and flowers grow." "Babies come from mommies." "Before you were born, you were just a thought with your mommy and daddy." "We all get old and eventually have to die." When the child receives a response that suggests a function or purpose, she is usually satisfied.

Preschool children have limited concepts of things and only pay attention to a small number of characteristics. For example, if they see water poured from a short fat glass to a tall thin one, they will say there is more in the tall thin one, even though no water has been added. Preschoolers cannot easily understand relational terms such as "longer or smaller" unless the objects compared are very different.

Language Development

Preschool children are active conversationalists. As they develop intellectually, their language usage increases.

a. They have a vocabulary of about 900 words at 3 years, 2,000 words at 5-6 years.

b. By the age of 5 years, children use complete sentences strung together with conjunctions.

c. Although they speak clearly, children will have problems with pronunciation and stuttering. These problems are usually temporary and a normal part of development.

d. They experiment with sounds often making up rhyming words. (3-6 years)

e. They use "because, how, and why" in an effort to interpret cause and effect. (4-6 years)

f. Their conversations tend to be one-sided. (4-6 years)

g. They love to giggle with "toilet talk," i.e., words such as poo-poo, pee-pee, etc. It's not until years later that children learn to adapt conversation to suit the company.

Social/Emotional Development

Initiative vs. Guilt

Preschoolers are highly social beings. They are ready to reach out and interact with other children in a more responsive fashion. A sense of self as a person: an "I" who thinks, feels, and acts is ready to interact in a more assertive way with her environment.

The social dimension that appears during this stage is initiative, at one pole, and guilt at the other. According to Erickson, children initiate activities mainly because they gain mastery of abilities. This holds true for motor, language, and play activities. Whether the child will leave this stage with a sense of initiative or sense of guilt depends to a considerable extent on how parents respond to self-initiated activities. Children who are given freedom to initiate motor, language and play activities have their sense of initiative reinforced. On the other hand, if the child is made to feel his motor activities are bad, questions are a nuisance, and play is silly or stupid, guilt over self-initiated activities will develop that could persist through later stages of life.

Concern and Problem Areas

Play/Imaginary Friends

By age five, children can play cooperatively in a small group. When children aren't available to play with, they invent imaginary companions to fill the void. Imaginary friends are fairly common beginning around age three. Children who have imaginary companions are often bright, creative, verbal, more cooperative, and more aggressive than children who do not. Existence of imaginary friends suggests that children generate the kinds of experiences they need for their own development that the environment cannot provide.

Sex Roles and Identity

Most preschoolers play with both boys and girls, but by age six prefer friends of their own sex. Girls imitate their mothers; boys try hard to act like men.

This stage is described as the time the Oedipal complex emerges. According to Freud, the child desires to be romantically involved with the parent of the opposite sex--to marry that parent and to have children. Preschool girls can be coy and charming to dad, while the preschool boy can be protective and seductive with his mother. During this period, preschoolers often feel competitive with the same sex parent, sometimes wishing the parent dead. Parents whould remain supportive and understanding of the child. Eventually, the sexual identities change where sons and daughters often wish to be just like dad or mom.

Nighttime Wetting

Children usually have been potty trained by around the age of three. However, accidents can, and do, happen, usually at night.

Nighttime wetting is more common among boys than girls, largely due to the fact that the nervous system of boys matures more slowly. Ask the child how he thinks the problem could be solved; perhaps by not drinking liquids after dinner, going to the bathroom just before bedtime, or not changing the sheets until morning. Again, the parents should remain supportive and give the child encouragement. Scolding or punishment will not solve the problem.

Excessive Masturbation

Although masturbation is a normal behavior, excessive masturbation can be a concern. Excessive masturbation may be the result of unhappiness or intense anxiety. Finding the sources of the unhappiness and anxiety and correcting them is the first step.

Often excessive masturbation in children results from not being a part of the social group. Providing many opportunities for activities with peers, helping the child achieve feelings of competence, and parental support often end the problem.

Fears

Fears are a natural part of growing up. During the preschool years, children often fear animals, the dark, imaginary creatures, and natural events like storms, fires, thunder, lightning. Parents who criticize a child for her fears, who are sarcastic, or even punish a child for having them are not helping to reduce the fears. These tactics only tend to decrease the self-confidence and self-esteem of the child. A model of confident, non-fearful behavior, discussion of the fear, support and understanding from the parents help the child understand the fear and eventually diminish it to a more manageable level.

SESSION IV: CHILD DEVELOPMENT AND PARENTAL STRESS

1.	Review of previous session	10 Minutes
2.	Sharing of calendar items from the previous week, the things participants did for themselves, frustrations with parenting	20 Minutes
3.	Case example exercise	60 Minutes
4.	Deep Muscle Relaxation	30 Minutes
5.	Assignments for following week:	
	a. DMR practice	
	b. Calendar: record something they enjoyed doing and any stressful situation they saw coming and were able to divert	

MATERIALS/SUPPLIES NEEDED

1. "Survival Hints" chart from previous week
2. Butcher paper, marking pens, tape
3. A copy of the case examples for each participant

SESSION IV

The trainer should post the "Survival Hints" chart from the previous week, and review it for the group. Some group members may have things they would like to share, insights they had about their children and the expectations they have for them. The trainer also should ask if participants learned new information from the handout, "Ages and Stages--Development of Children," which was their reading assignment for the previous week.

Then, ask the participants to share items from their calendars--things they did for themselves and moments of anger or frustration. It is likely that some participants will have accomplished their planned task from the previous week. Give an opportunity for these group members to describe their activity. This is a time when group members can be supportive of each other's achievements.

Hand out the case examples. Depending on the size of the group, the trainer may wish to break into small groups. The goal of this exercise is to help parents recognize that at certain ages children go through "stressful" testing of their parents. It should be recognized that this is both normal and stressful for parents. A specific goal is to help parents learn how to cope with these age/stage stresses, and to learn that these actions and reactions of their children are normal. The group members should be instructed to read the examples and discuss the questions at the end. If this is done in a large group, the trainer can read the case examples out loud to the group, then facilitate a discussion.

The case examples will likely elicit a great deal of discussion from the group members, and they will have their own situations to share. "Is this normal?" will be a recurring theme. The trainer must have substantial background in child development and parenting, in order to lead the group effectively. The trainer will need to return the discussion back to developmental stages of children, motives of both parents and children, and to effective ways of dealing with these situations. Some parents have difficulty recognizing that what they believe to be their child's motives are not accurate. For example, young children are not trying to humiliate a parent by acting out in a store--the child's motive, which often is simply to get attention, or to "get something" must be understood by the parent.

As suggestions are made from the group members about how to deal with various childrearing problems, the trainer must be alert to suggestions that may not be good practice, and may even be abusive. The trainer must counter these with positive alternatives.

It may be difficult to end the discussion, but the trainer should point out that these issues will continue to be discussed during subsequent sessions. Make the assignments for the following week:

1. DMR practice

2. Record on their calendars something they enjoyed doing and any stressful situations that they saw coming and were able to divert

CASE EXAMPLES

CASE EXAMPLE I

Mary needs to stop at the drug store to pick up a prescription and she has 3-year old Kevin with her. Kevin has recently been very interested in the television ads for Go-Bots (transformers), and has spent lots of his time pretending that he has one.

It is 5:30 and Kevin has been at day care all day--this stop will make dinner late, but it is important.

As Mary passes through the store, Kevin gets all excited and starts pulling at Mary's hand. He spots a Go-Bot display. He asks for one, and then really demands one. Mary has no money for the toy and strongly says "No!" Kevin begins to cry and then throws himself down and really screams.

Mary's stress level is off the scale. What should she do next?

CASE EXAMPLE II

Brenda is 3 and has been toilet trained for almost 8 months. Just last week she started wetting her bed at night, and occasionally her pants during the day. She also has started sucking her thumb, something she hasn't done for months.

As her mother, you are worried and angry about this. The day care center says she cannot stay if she is not toilet trained. That's all you need right now, with the 10-day old baby, and all. What should you do?

CASE EXAMPLE III

Jane is 15 and your oldest. Basically, she's a good kid, with satisfactory grades, and she helps out around home. Lately she has been really pushing to stay our late on school nights. So far, you have said no and she is minding, but you are nervous that she'll disobey you and do it anyway.

You approve of most of her friends, but lots of teenagers are taking drugs and drinking alcohol and you're somewhat afraid that she will start, too.

She is pushing and pushing about staying out later and you are fighting with her more and more. What should you do?

SESSION V: CHILD DEVELOPMENT AND PARENTAL VALUES

1. Warm-up, sharing items from previous week's calendars, diverting stressful situations — 20 Minutes

2. "Children's Trait Inventory" exercise — 60 Minutes

3. Deep Muscle Relaxation — 30 Minutes

4. Assignments for following week:

   a. DMR practice

   b. Calendar: record two or three things they observed their children doing that they felt good about and enjoyable things they did for themselves

MATERIALS/SUPPLIES NEEDED

1. Handout, "Children's Trait Inventory"

2. Butcher paper, marking pens, tape

3. Pens or pencils

SESSION V

As in previous sessions, it is important that the trainer have a solid background in child development and parenting. This session is not as structured as previous ones. The group has been developing and it is important to allow more time for the group members to contribute. The trainer's role should be one of encouraging the participants to share.

The trainer should ask participants to share items from their calendars of the previous week, drawing out and reinforcing the successful diverting of stressful situations. In addition, ask for group members to share their experiences with DMR.

Participants may have additional issues about child development, from the previous session, which they would like to discuss or share with the group. If the group did not complete the case example exercise from the previous session, this may be done.

The trainer, then should briefly state the essential ingredients of "positive parenting," which will form the basis for the exercises in this session. Some points to make:

-If we want to parent successfully, we must look at our own behavior first.

-Adults and children are more effective when they feel good about themselves.

-Our daily activities make up our long-term patterns.

-It is easier to raise and teach our children when we understand our own values and long-term goals.

This session will provide some guideposts to help participants look at where they are wanting to go with their children and how to get there. The trainer must point out that, when we are talking about the elements of good parenting, we must ask ourselves what it is we want to accomplish as a parent. Safety for our children, to protect them from sexual abuse or from kidnapping, is one kind of accomplishment. Parents also want to impart their own values to their children. The trainer should ask participants to give examples of where values come from (church, family, friends, school, and so forth).

Parents hear many "shoulds" about parenting, and many of these can create confusion. The trainer may want to explore this with the group members, in order to reassure them that there are many approaches to parenting, and that the important element is that parents have a vision of how they would like their children to be and that they are working to create an environment at home that is conducive to this.

One way of beginning to understand the values we hold for our children, many of which are based on how we were raised, is to consider how we would like our children to be, and to recognize whether or not our day-to-day interactions with them support or contradict these values. How we as

parents behave relative to these values is more important than our words. Distribute the "Children's Trait Inventory." Ask participants to choose one of their children and to then follow the instructions to complete the inventory. They should not spend a lot of time "thinking about" their responses, but put down their "gut" reaction.

Ask for all group members to share their most important choices. The trainer can use this to show how different we are from one another, and that it's difficult to specify an exact "how to," since we each have a different set of goals. This also is a good time to point out how we can give double messages and create confusion in our children. For example, we may choose "honesty" as our most valued trait, yet tell our child when she answers the phone to tell the caller that we're not at home. This places children in a difficult situation, and the confusion may result in the child saying something like, "Mom says she's not at home."

Ask participants how they felt as they completed the inventory. Was it difficult to complete? Was it easy to pick the most important traits? Were they surprised by their choices? Allow time for discussion.

Summarize by pointing out that it isn't easy to choose one top value for chidren; some values conflict with each other (such as cooperation and competition); we vary on the importance we give to values--one person's top value may not be on another's list; and the values we choose for our children reflect our own values and what we were taught by our own parents. Sometimes, too, we expect more of our chidren than we do of ourselves--we may expect our chidren to be more honest than we ourselves are, as in the case of the telephone call.

Allow for a discussion of values, contradictions and expectations. Explain that during the next session, we will be exploring some of the reasons why children behave the way they do, how we can prompt positive behaviors in children, and examine anger and how we deal with it.

Make the assignments for the following week:

1. DMR practice

2. Record on their calendars things they did for themselves and valued traits they see in their children

Conduct the DMR exercise.

CHILDREN'S TRAIT INVENTORY

Instructions: Think of one of your children. Read the list of traits and place a mark next to the five traits that are most important to you for this child. Circle the mark next to the trait that is the most important.

_____ Active, lots of energy

_____ Aggressive, gets own way

_____ Athletic, does well in sports

_____ Cheerful, pleasant, friendly

_____ Clean, neat, uncluttered

_____ Competent, does most things well

_____ Coordinated, physically coordinated

_____ Courageous, brave

_____ Creative, innovative

_____ Curious, inquisitive

_____ Flexible, resourceful, adaptable

_____ Frugal, conserves resources and energy

_____ Generous, shares with others

_____ Helpful to others, altruistic

_____ Honest, truthful

_____ Independent, self-reliant

_____ Intelligent, intellectual

_____ Obedient, compliant

_____ Organized, systematic

_____ Passive, not aggressive

_____ Persistent, "finishing power"

_____ Polite, well-mannered

_____ Popular, liked by others

_____ Quiet, is seen but not often heard

(OVER)

_____ Religious, respects God

_____ Self-centered, looks out for self

_____ Self-controlled, self-restraint

_____ Sensitive, considerate of others' feelings

_____ Verbal, talks a lot

From: Building Healthy Families, The Portage Project--Resource Access Project, Portage, Wisconsin.

SESSION VI: WHY CHILDREN BEHAVE THE WAY THEY DO

1.	Sharing of items from calendars of previous week	15 Minutes
2.	"Why Do Children Misbehave" exercise; small groups; discussion; example situations	40 Minutes
3.	"Preventing Misbehavior" exercise and discussion	40 Minutes
4.	DMR practice	30 Minutes

5. Assignments for the next week:

   a. Complete the Anger Scale

   b. DMR practice

   c. Calendar: record things they did for themselves

MATERIALS/SUPPLIES NEEDED

1. Handouts: "Why Children Misbehave," "Preventing Misbehavior," "Example Situations," and the Anger Scale

2. Butcher paper, marking pens, tape

3. Pens or pencils and paper

SESSION VI

For a warm-up, ask participants to share items from their calendars of the previous week. There may be some discussion which flows from these items.

Begin the "Why Do Children Misbehave" exercise. Divide the participants into small groups and ask them to brainstorm and record answers to the question, "Why do children misbehave?" Allow 5-10 minutes for this activity.

Then, moving from group to group, ask for each group's responses. Record them on butcher paper. Continue the discussion, noting that behavior is a means of communicating. Children typically behave in certain ways for a reason. Note some possible reasons:

-They may have received inadequate information. Children need to be taught how things happen. They do not perceive things as adults do. Children also need to observe and participate in activities. They don't always understand the connections between events, such a toys being left all over the house means that someone has to pick them up--it doesn't just happen by itself.

-They are looking for more attention than they are getting. Attention is one of the most important elements in a child's quest for survival. Children need to feel important and needed.

-They are feeling frustrated or discouraged. When a child is misbehaving, we need to look at what we are expecting. We may be asking too much from the child; the tasks may be too difficult.

-They are seeking more control of the situation. In many cases, children are placed in a powerless situation. It is a natural reaction to try to gain control of the situation. Deflecting power struggles and allowing the child to have choices will ultimately reduce behavior problems and increase self-esteem.

Hand out "Why Children Misbehave." Point out that we are really talking about why children behave the way they do, and that "misbehave" is a negative idea, while the other is positive. Instruct the participants to mark out "misbehave" and write in "behave the way they do," instead, on their handout. Answer any questions participants have about the points above.

Behavior can be explained by looking at antecedents (actions or words) that occur before a child's behavior takes place and consequences (events, actions or words) that occur after a child's behavior. In many cases, parents actually set up a child to misbehave. Consequences are often called reinforcement and can be perceived by the child as either positive or negative. Point out that if antecedents and consequences are positive,

This lecture, the handouts and the exercises are drawn from Building Healthy Families, Child Abuse and Neglect Prevention Activities for Head Start Staff and Parents, The Portage Project--Resource Access Project, Portage, Wisconsin.

they increase the chance that the same behavior will recur in a similar manner. We need to be sure that we are reinforcing only those behaviors we want to occur more frequently.

Divide the participants into small groups and hand out the "Example Situations." Instruct each group to read the examples and to consider the possible reasons for the child's behavior and how the "misbehavior" could have been prevented. They should look for antecedents and consequences related to the identified reasons for the behavior. Allow 10-15 minutes for this discussion.

Ask each small group to share their ideas with the other participants. Wrap-up the exercise by answering any questions participants have.

Explain that the best way to deal with behavior problems is to prevent them. This activity will outline steps that lessen the probability of behavior problems from occurring. They may not eliminate all misbehavior, but they should certainly lessen the amount that a parent will have to deal with.

Distribute the "Prevention of Misbehavior" handout. It can be used as an outline and for note-taking. Each item on the handout should be explained, and discussed.

Create and Maintain a Positive Atmosphere

Create a learning environment which encourages creativity and exploration on the part of the child. Allow the child to make choices and offer a variety of experiences.

Be enthusiastic about learning activities and chores that need to be done. If you see things positively, the child will be much more likely to do so, too.

Allow humor and laughter to occur. A laughing child can't help feeling good about him/herself.

Have positive expectations of your child's behavior. What you expect is often what you get.

Plan Ahead

In many instances we can predict when problems will occur. We also can predict the causes and many times plan to avoid the problem.

Take time to practice difficult activities or new situations such as outings. Children need to know what will be expected of them. Spending a little time rehearsing an event like a shopping trip may avoid a number of problems that might have occurred.

Clarity of Statements and Feelings

Children understand differently from adults. We need to make sure that the child understands what we are saying. Are we asking the child to do something or are we telling the child to do something? Are we offering the child a choice in the matter? Give a child a clear message of what is occurring and why.

Follow Through

The small child will usually judge what you will do more from what you have done in the past than what you say you will do this time. This reflects their dependence on personal experience for explaining their world.

Avoid repeating yourself; assist the child to comply and the child will learn that you mean what you say.

Think before you speak; if you want your child to believe you, it is simplest to offer only choices or consequences you are willing to provide. Avoid threats that can't or won't be carried out.

Good Rules

Be sure that the rules that you set are fair and consistent. Limit the number of rules for any situation--no more than 5 or 6 for children under seven years old.

You can change rules, but make sure the child knows that a rule has been changed.

Scheduling

If a child becomes difficult at the same time each day, try to change the schedule so that difficult tasks occur when the child is well-rested and alert. This may not always be possible, but will certainly help when you can take it into account.

Try to have a flow of activities from active to quieter times. For example, right before bedtime is a good time for a story, or looking through a book.

Materials

Offer a variety of materials for a child to explore and use throughout playtime. Don't have too many materials out at once.

Have the children take some responsibility for picking up and organizing materials.

Try to keep materials in good repair and make sure that they are at the appropriate level of difficulty. Nothing can be more frustrating than a new toy that is too difficult to play with.

Ask participants if they can think of any examples from their personal experiences that illustrate any of these steps. Ask if they have found any other methods that have proved to be helpful in preventing misbehavior. Summarize by emphasizing that some misbehavior can be prevented, but not all.

Announce the assignments for the next week:

1. DMR practice
2. Complete the "Anger Scale" and bring it next week
3. Record situations of anger or frustration during the week

Conduct the DMR exercise.

WHY CHILDREN MISBEHAVE

1. INADEQUATE INFORMATION

2. ATTENTION

3. FRUSTRATION

4. POWER/CONTROL

PREVENTION

1. Positive Atmosphere

2. Plan Ahead

3. Clarity - Statements & Feelings

4. Follow Through

5. Good Rules

6. Scheduling

7. Materials

Crary, Elizabeth Without Spanking or Spoiling: A Practical Approach to Preschool Guidance, 1979.

EXAMPLE SITUATIONS

For the past two weeks, David gets up after being put to bed. His parents have always had a rule that once you're in bed, you must remain there. Up to this point, there hasn't been a problem with enforcing this rule, but now David has made a habit of asking for special favors to delay climbing into bed. Each time David gets out of bed one of his parents will take him back and tuck him in once more.

Jane, who is 14, knows that the family rule is that if she is not home at the agreed-upon time, she must call to let her parents know where she is and when she will be home. Jane has made a new friend at school and has been going home with her after school for the past few weeks. Twice in the past week Jane has not been home at 5:00, the agreed-upon time, and has "forgotten" to call her parents. The second time she was late, she didn't get home until after 6:00. Her parents grounded her and she must come home directly from school for the next two weeks. She cannot have any visitors.

ANGER SCALE

Instructions: Read each situation, and rate how angry you would be. Put a number from 0 to 4 in the space after the situation (0 = little or no anger; 4 = very angry).

You unpack an appliance you have just bought, plug it in, and discover that it doesn't work. _____

You are overcharged by a repairman who has you over a barrel. _____

You are singled out for correction, when the actions of others go unnoticed. _____

You car gets stuck in the mud or snow. _____

You are talking to someone and they don't answer you. _____

Someone pretends to be something they are not. _____

While you are struggling to carry four cups of coffee to your table at a cafeteria, someone bumps into you, spilling the coffee. _____

You have hung up your clothes, but someone knocks them to the floor and fails to pick them up. _____

You are hounded by a salesperson from the moment that you walk in a store. _____

You have made arrangements to go somewhere with a person who backs out at the last minuete and leaves you hanging. _____

You are being joked about or teased. _____

Your car is stalled at a traffic light, and the guy behind you keeps blowing his horn. _____

You accidently make the wrong kind of turn in a parking lot. As you get out of your car, someone yells at you, "Where did you learn to drive?" _____

Someone makes a mistake and blames it on you. _____

You are trying to concentrate, but a person near you is tapping his foot. _____

You lend someone an important book or tool, and they don't return it to you. _____

You have had a busy day, and the person you live with starts to complain about how you forgot to do something you agreed to do. _____

You are trying to discuss something important with your mate or partner who isn't giving you a chance to express your feelings. _____

You are in a discussion with someone who persists in agruing about a topic they know very little about. _____

Someone butts into an argument between you and someone else. _____

You need to get somewhere quickly, but the car in front of you is going 25 mph in a 40 mph zone, and you can't pass. _____

You step on a gob of chewing gum. _____

You are mocked by a small group of people as you pass them. _____

In a hurry to get somewhere, you tear a good pair of slacks on a sharp object. _____

You use your last coin to make a phone call, but you are disconnected before you finish dialing and the quarter is lost. _____

ADD UP YOUR SCORE, MAKING SURE THAT YOU DIDN'T SKIP ANY ITEMS. _____

This scale was developed by Dr. Raymond W. Novaco of the Program in Social Ecology at the University of California, Irvine. The full scale contains eighty items.

SESSION VII: ANGER AND STRESS

1.	Warm-up--a discussion of items from the previous week's calendar and/or stresses encountered during the week	15 Minutes
2.	Anger Scale--discussion on scores, using scoring ranges	15 Minutes
3.	Priority-setting exercise	40 Minutes
4.	Small group exercise	20 Minutes
5.	Deep Muscle Relaxation	30 Minutes
6.	Assignments for the following week:	
	a. Deep Muscle Relaxation	
	b. Bring to the final group session a list of any topics or issues to be reviewed or explored further	

MATERIALS/SUPPLIES NEEDED

1. Sheets of blank paper
2. Pens or pencils
3. Handout: Case Example
4. Flip-chart or butcher paper; marking pens; tape

SESSION VII

Open the session with a warm-up discussion of the items recorded on the previous week's calendar, and/or stresses which participants encountered during the week and how they dealt with them.

Using the scoring sheet for the anger scale, discuss the participants' scores. Explain that the scale is useful for us because it helps us see the kinds of things that make us angry and gives us an idea of how we compare with others, when faced with potentially anger-producing situations. Ask the participants to share signs of anger that they see in themselves or others.

After participants have mentioned several signs of anger (which may be recorded on butcher paper), explain that the reasons for a given score on the scale may vary from person to person. They may want to take the test again on a different day to see the different results, for example. Point out that those things that make us angry one day may have no effect on us at all on another day. We need to begin to see our anger, and the strength of it, as having to do with many different variables, and not necessarily with the specific event or situation we're reacting angrily to. The trainer should pay particular attention to the participants' reactions to their scores on the anger scale--some may have trouble dealing with a high score, and may be concerned about it. As in other situations during the training sessions, the trainer may want to talk with individuals during a break or following the session, if this seems appropriate.

Next, ask participants to share some of the stressful events that they have been able to identify in their lives. The trainer should separate these into two categories: stresses that are related to parenting and stresses that are everyday ones. Point out that some of these are out of our control, in both categories. This, of course, may just add to our stress level. It is important for us to understand what our own particular stresses are (they are different for each of us).

Introduce the priority-setting exercise by handing out blank pieces of paper to each participant and ask them to think of the week to come. Then, to choose a day which may be particularly stressful. Instruct them to list all of the things they "need to" do on that day, or would like to do. Allow about 5 minutes for this. Then, ask them to prioritize their lists: place an "A" next to each of the things that are very important; a "B" next to those which are somewhat important; and a "C" next to those which are not really all that important. Allow another 5 minutes for participants to rate their lists.

After this has been accomplished, ask the participants to think about their lists and decide whether or not there is anything they would like to change. Explain that when we are facing a very busy day, we need to accomplish all of the "A's", then move on to the "B's", and only when these are accomplished should we move into the "C's".

Wrap-up this exercise by discussing the need to balance the needs of our children with our own needs, reminding participants of the importance of self-care. Did the group learn anything about their up-coming day? About how to handle a particularly stressful day, in advance? Ask participants

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to share their feelings about priority-setting and how useful it will be for them to practice this in the future.

Begin the small group exercise by asking participants to break into small groups (or, if the group is small, conduct this exercise with the full group). Hand out a copy of the case example to each participant, and instruct them to read the example and to discuss how they would solve the problem. Allow about 10 minutes for the discussions. Ask the groups to share their solutions with the large group.

Then, the trainer should take the same problem, and drawing from what the small groups have said, outline the problem-solving, goal-setting system. That is:

-Define the problem and set the priority

-Establish the goal

-List ways to accomplish the goal

-Take action

Wrap-up the exercise by discussing anger and discipline; identifying stressful situations; prioritizing one's day and giving ourselves permission not to do some things, e.g., the "C's"; and problem-solving.

Conduct the Deep Muscle Relaxation exercise.

Make assignments for the coming week:

1. DMR

2. List items, concerns and issues to be reviewed at the final group session

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SCORING FOR THE ANGER SCALE

0-45	The amount of anger and annoyance you generally experience is remarkably low. Only a few percent of the population will score this low on the test.
46-55	You are substantially more peaceful than the average person
56-75	You respond to life's annoyances with an average amount of anger
76-85	You frequently react in an angry way to life's many annoyances. You are substantially more irritable than the average person.
86-100	You are a true anger champion, and you are plagued by frequent intense furious reactions that do not quickly disappear. You probably harbor negative feelings long after the initial insult has passed. You may have a reputation as a firecracker or hothead among people you know. You may experience frequent tension headaches and elevated blood pressure. Your anger may often get out of control and lead to impulsive hostile outbursts which at times get you into trouble. Only a few percent of the adult population react as intensely as you do.

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CASE EXAMPLE

John is a single father with three children. His youngest child is sick with a bad cold and cannot go to her regular day care center today. John needs to find a babysitter for her, and to pick up the babysitter and bring her back home before he can go to work. He also must take each of the two older children to their schools. After work, he will have to pick up the two older children from their latch-key program, and take the babysitter home. He's concerned that he might not make it to his night class, since he still hasn't found a babysitter for tonight, and he's worried about it because he has an important test.

How would you solve John's problems?

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SESSION VIII: REVIEW AND CONCLUSION

The final session of this workshop series should be devoted to review and to assisting participants in making decisions about continued contact with and providing support to each other. The participants will have issues they would like to discuss, and, if not, the trainer should use this session to review the important points from each of the previous seven sessions.

At the conclusion of the session, certificates should be presented to those who attended the sessions. The trainer may decide to award certificates only to those who attended all of the sessions, or to those who attended 6 or 7 out of the eight sessions.

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